

Fill in this information to identify the case:

Debtor name Phase One Services LLC

United States Bankruptcy Court for the:

Southern District of TexasCase number (if known): 23-30835☐ Check if this is an amended filing**Official Form 202****Declaration Under Penalty of Perjury for Non-Individual Debtors****12/15**

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206A-Summary)
- ☐ *Amended Schedule* _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03/10/2023
MM/ DD/ YYYY

X /s/ Ashley Williams
Signature of individual signing on behalf of debtor

Ashley Williams
Printed name

President
Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Phase One Services LLC

United States Bankruptcy Court for the:

Southern District of TexasCase number (if known): 23-30835☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

☐ No. Go to Part 2.☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1 Bank of AmericaChecking account0323\$0.00

Additional Page Total - See continuation page for additional entries

\$0.00

4. Other cash equivalents (Identify all)

None

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$0.00

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

☐ No. Go to Part 3.☒ Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1 Houston Industrial Yard, LLC\$53,000.00

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Name

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

None

9. Total of Part 2

Add lines 7 through 8 (including amounts on any additional sheets). Copy the total to line 81.

\$53,000.00**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes. Fill in the information below.Current value of debtor's
interest**11. Accounts Receivable**

11a. 90 days old or less:	<u>\$306,781.12</u>	-	<u>\$0.00</u>	= →	<u>\$306,781.12</u>
	face amount		doubtful or uncollectible accounts			

11b. Over 90 days old:	<u>\$41,374.00</u>	-	<u>\$0.00</u>	= →	<u>\$41,374.00</u>
	face amount		doubtful or uncollectible accounts			

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$348,155.12**Part 4: Investments****13. Does the debtor own any investments?**☒ No. Go to Part 5.☐ Yes. Fill in the information below.Valuation method used for
current valueCurrent value of debtor's
interest**14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

None

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of fund or stock:	% of ownership:
------------------------	--------------------

None

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

Debtor Phase One Services LLCCase number (if known) 23-30835

Name

None

17. Total of Part 4

Add lines 14 through 16 (including any additional sheets). Copy the total to line 83.

\$0.00**Part 5:** Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
- ☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

19. Raw materials

None

20. Work in progress

None

21. Finished goods, including goods held for resale

None

22. Other inventory or supplies

None

23. Total of Part 5

Add lines 19 through 22 (including any additional sheets). Copy the total to line 84.

\$0.00**24. Is any of the property listed in Part 5 perishable?**

- ☒ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
- ☐ Yes

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

Debtor Phase One Services LLCCase number (if known) 23-30835

Name

General description**Net book value of
debtor's interest**
(Where available)**Valuation method used
for current value****Current value of debtor's
interest****28. Crops — either planted or harvested**

None

29. Farm animals *Examples: Livestock, poultry, farm-raised fish*

None

30. Farm machinery and equipment (Other than titled motor vehicles)

None

31. Farm and fishing supplies, chemicals, and feed

None

32. Other farming and fishing-related property not already listed in Part 6

None

33. Total of Part 6

Add lines 28 through 32. Copy the total to line 85.

\$0.00**34. Is the debtor a member of an agricultural cooperative?**☒ No☐ Yes. Is any of the debtor's property stored at the cooperative?☐ No☐ Yes**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**☒ No☐ Yes**36. Is a depreciation schedule available for any of the property listed in Part 6?**☒ No☐ Yes**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?**☒ No☐ Yes**Part 7:** Office furniture, fixtures, and equipment; and collectibles**38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**☐ No. Go to Part 8.☒ Yes. Fill in the information below.

Debtor Phase One Services LLCCase number (if known) 23-30835

Name

General description**Net book value of
debtor's interest**
(Where available)**Valuation method used
for current value****Current value of debtor's
interest****39. Office furniture**39.1 Desks(11) (Unknown) \$3,300.00

Additional Page Total - See continuation page for additional entries

\$1,154.00**40. Office fixtures**

None

**41. Office equipment, including all computer equipment and
communication systems equipment and software**41.1 Cell Phones (9) (Unknown) \$450.00

Additional Page Total - See continuation page for additional entries

\$4,700.00**42. Collectibles** Examples: Antiques and figurines; paintings, prints or
other artwork; books, pictures, or other art objects; china and crystal;
stamp, coin, or baseball card collections; other collections,
memorabilia, or collectibles

None

43. Total of Part 7

Add lines 39 through 42. Copy the total to line 86.

\$9,604.00**44. Is a depreciation schedule available for any of the property listed in Part 7?**☒ No☐ Yes**45. Has any of the property listed in Part 7 been appraised by a professional within the last year?**☒ No☐ Yes**Part 8: Machinery, equipment, and vehicles****46. Does the debtor own or lease any machinery, equipment, or vehicles?**☐ No. Go to Part 9.☒ Yes. Fill in the information below.**General description**Include year, make, model, and identification numbers (i.e., VIN, HIN,
or N-number)**Net book value of
debtor's interest**
(Where available)**Valuation method used
for current value****Current value of debtor's
interest****47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm
vehicles**47.1 2016 International Prostar Sleeper 3210 (Unknown) \$25,000.00

Debtor Phase One Services LLCCase number (if known) 23-30835

Name

47.2 2016 Peterbilt 579 (Unknown) \$60,000.0047.3 2017 International Prostar Sleeper 0735 / Leased through OTR Leasing (Unknown) \$25,000.00

Additional Page Total - See continuation page for additional entries \$215,480.00

48. **Watercraft, trailers, motors, and related accessories** *Examples:*
Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

None

49. **Aircraft and accessories**

None

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

None

51. **Total of Part 8**

Add lines 47 through 50. Copy the total to line 87.

\$325,480.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**☒ No☐ Yes53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**☒ No☐ Yes**Part 9: Real Property**54. **Does the debtor own or lease any real property?**☒ No. Go to Part 10.☐ Yes. Fill in the information below.**General description**

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available

Nature and extent of debtor's interest in property**Net book value of debtor's interest**

(Where available)

Valuation method used for current value**Current value of debtor's interest**55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has interest**

None

56. **Total of Part 9**

Add the current value on lines 55.1 through 55.3 and entries from any addition sheets. Copy the total to line 88.

\$0.00

Debtor Phase One Services LLCCase number (if known) 23-30835

Name

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 10: Intangibles and Intellectual Property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes. Fill in the information below.

General description

Net book value of
debtor's interest
(Where available)Valuation method used
for current valueCurrent value of debtor's
interest

60. Patents, copyrights, trademarks, and trade secrets

None

61. Internet domain names and websites

61.1 www.phaseonelogistics.com (Unknown) \$1.00

62. Licenses, franchises, and royalties

62.1 MC# 166410 (Unknown) \$1.00

63. Customer lists, mailing lists, or other compilations

None

64. Other intangibles, or intellectual property

None

65. Goodwill

None

66. Total of Part 10

Add lines 60 through 65. Copy the total to line 89.

\$2.00

67. Do your lists or records include personally identifiable information of customers? (as defined in 11 U.S.C. §§ 101(41A) and 107)

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

Debtor Phase One Services LLCCase number (if known) 23-30835

Name

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

☒ No☐ Yes**Part 11:** All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

☐ No. Go to Part 12.☒ Yes. Fill in the information below.Current value of debtor's
interest

71. Notes receivable

Description (include name of obligor)

None

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

None

73. Interests in insurance policies or annuities

None

74. Causes of action against third parties (whether or not a lawsuit has been filed)

Stolen Funds(Former Employees) Police Report File

74.1 #1752795-22(Unknown)Nature of Claim Stolen FundsAmount Requested \$600,000.0075. Other contingent and unliquidated claims or causes of action of every nature,
including counterclaims of the debtor and rights to set off claims

None

76. Trusts, equitable or future interests in property

None

77. Other property of any kind not already listed Examples: Season tickets,
country club membership

None

78. Total of Part 11

Add lines 71 through 77. Copy the total to line 90.

\$0.00

Debtor Phase One Services LLC
Name

Case number (if known) 23-30835

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Debtor Phase One Services LLC
NameCase number (if known) 23-30835

Part 12: Summary

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	<u>\$0.00</u>	
81. Deposits and prepayments. Copy line 9, Part 2.	<u>\$53,000.00</u>	
82. Accounts receivable. Copy line 12, Part 3.	<u>\$348,155.12</u>	
83. Investments. Copy line 17, Part 4.	<u>\$0.00</u>	
84. Inventory. Copy line 23, Part 5.	<u>\$0.00</u>	
85. Farming and fishing-related assets. Copy line 33, Part 6.	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; collectibles. Copy line 43, Part 7.	<u>\$9,604.00</u>	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	<u>\$325,480.00</u>	
88. Real property. Copy line 56, Part 9.....		→ <u>\$0.00</u>
89. Intangibles and intellectual property. Copy line 66, Part 10.	<u>\$2.00</u>	
90. All other assets. Copy line 78, Part 11.	+ <u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column.....	91a. <u>\$736,241.12</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92		<u>\$736,241.12</u>

Debtor Phase One Services LLC
NameCase number (if known) 23-30835**Additional Page****All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts - Continued**

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.2 <u>Navy Federal Credit Union</u>	<u>Checking account</u>	<u>5800</u>	<u>(Unknown)</u>
3.3 <u>Navy Federal Credit Union</u>	<u>Checking account</u>	<u>6649</u>	<u>(Unknown)</u>
3.4 <u>Bank of America</u>	<u>Checking account</u>	<u>0336</u>	<u>(Unknown)</u>

General description**Net book value of debtor's interest**
(Where available)**Valuation method used for current value****Current value of debtor's interest****39. Office furniture - Continued**

39.2 <u>Chairs (16)</u>	<u>(Unknown)</u>		<u>\$704.00</u>
39.3 <u>Filing Cabinets(4)</u>	<u>(Unknown)</u>		<u>\$250.00</u>
39.4 <u>Table</u>	<u>(Unknown)</u>		<u>\$200.00</u>

41. Office equipment - Continued

41.2 <u>Printers (4)</u>	<u>(Unknown)</u>		<u>\$300.00</u>
41.3 <u>Copier</u>	<u>(Unknown)</u>		<u>\$400.00</u>
41.4 <u>Computers (12)</u>	<u>(Unknown)</u>		<u>\$3,600.00</u>
41.5 <u>Monitors (8)</u>	<u>(Unknown)</u>		<u>\$400.00</u>

General description

Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)

Net book value of debtor's interest
(Where available)**Valuation method used for current value****Current value of debtor's interest****47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles - Continued**

47.4 <u>2017 International Prostar Sleeper 0735</u>	<u>(Unknown)</u>		<u>\$25,000.00</u>
47.5 <u>2014 Freightliner Cascadia 0807 / Leased through Financial Pacific</u>	<u>(Unknown)</u>		<u>\$36,000.00</u>
47.6 <u>2017 International Prostar 122 9506 / Leased through Financial Pacific</u>	<u>(Unknown)</u>		<u>\$32,000.00</u>
47.7 <u>2016 Freightliner Columbia 6192</u>	<u>(Unknown)</u>		<u>\$30,000.00</u>
47.8 <u>2013 Volvo VNL 6x4 1423 / Leased through Financial Pacific</u>	<u>(Unknown)</u>		<u>\$32,000.00</u>
47.9 <u>2014 Volvo VNL 6x4 TR</u>	<u>(Unknown)</u>		<u>\$28,000.00</u>
47.10 <u>2014 Freightliner Cascadia 5809</u>	<u>(Unknown)</u>		<u>\$32,480.00</u>

Fill in this information to identify the case:

Debtor name Phase One Services LLCUnited States Bankruptcy Court for the: Southern District of Texas
(State)Case number (if known): 23-30835☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

2.1 Creditor's name

Dakota Financial

Describe debtor's property that is subject to a lien

2017 International Prostar Sleeper 0735\$38,700.00\$25,000.00

Creditor's mailing address

11755 Wilshire Blvd Suite 1670

Describe the lien

18-Wheeler LoanLos Angeles, CA 90025

Is the creditor an insider or related party?

- ☒ No
- ☐ Yes

Creditor's email address, if known

Date debt was incurred _____

Is anyone else liable on this claim?

- ☒ No
- ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

Last 4 digits of account number _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Do multiple creditors have an interest in the same property?

- ☒ No
- ☐ Yes. Specify each creditor, including this creditor, and its relative priority.
- _____
- _____

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$175,180.00

Debtor Phase One Services LLC
NameCase number (if known) 23-30835**Part 1:** Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim**Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.**

2.3 Creditor's name <u>Financial Pacific Leasing</u> Creditor's mailing address <u>3455 S. 344th Way Ste 300</u> <u>Federal Way, WA 98001</u> Creditor's email address, if known _____ Date debt was incurred _____ Last 4 digits of account number ____ _ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines ____	Describe debtor's property that is subject to a lien <u>2014 Freightliner Cascadia 5809</u> Describe the lien <u>Lease for Trucks</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>unknown</u>	<u>\$32,480.00</u>
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Debtor Phase One Services LLC
NameCase number (if known) 23-30835

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.4 Creditor's name <u>Financial Pacific Leasing</u> Creditor's mailing address <u>3455 S. 344th Way Ste 300</u> <u>Federal Way, WA 98001</u> Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number ____ ____ ____ ____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien <u>2013 Volvo VNL 6x4 1423</u> Describe the lien <u>Lease for Trucks</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	_____ unknown _____ \$32,000.00
2.5 Creditor's name <u>Financial Pacific Leasing</u> Creditor's mailing address <u>3455 S. 344th Way Ste 300</u> <u>Federal Way, WA 98001</u> Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number ____ ____ ____ ____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien <u>2014 Freightliner Cascadia 0807</u> Describe the lien <u>Lease for Trucks</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	_____ unknown _____ \$36,000.00

Debtor Phase One Services LLC
NameCase number (if known) 23-30835

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.6 Creditor's name <u>Financial Pacific Leasing</u> Creditor's mailing address <u>3455 S. 344th Way Ste 300</u> <u>Federal Way, WA 98001</u> Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien <u>2017 International Prostar 122 9506</u> Describe the lien <u>Lease for Trucks</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>unknown</u>	<u>\$32,000.00</u>
2.7 Creditor's name <u>Navitas Credit</u> Creditor's mailing address <u>203 Fort Wade Road 300</u> <u>Ponte Vedra, FL 32081</u> Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien <u>2016 Freightliner Columbia 6192</u> Describe the lien <u>18-Wheeler Loan</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$52,000.00</u>	<u>\$30,000.00</u>

Debtor Phase One Services LLC
NameCase number (if known) 23-30835

Part 1: Additional Page		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.8 Creditor's name <u>OTR Leasing</u>	Describe debtor's property that is subject to a lien <u>2016 Peterbilt 579</u>	<u>unknown</u>	<u>\$60,000.00</u>
Creditor's mailing address <u>9100 Liberty Drive</u> <u>Liberty, MO 64068</u>	Describe the lien <u>Lease on Trucks</u>		
Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
Last 4 digits of account number ____ _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			
2.9 Creditor's name <u>OTR Leasing</u>	Describe debtor's property that is subject to a lien <u>2017 International Prostar Sleeper 0735</u>	<u>unknown</u>	<u>\$25,000.00</u>
Creditor's mailing address <u>9100 Liberty Drive</u> <u>Liberty, MO 64068</u>	Describe the lien <u>Lease for Trucks</u>		
Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).		
Last 4 digits of account number ____ _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			

Debtor Phase One Services LLC
NameCase number (if known) 23-30835

Part 1: Additional Page		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.			
2.10	Creditor's name <u>Small Business Administration</u> Creditor's mailing address <u>409 3rd St SW</u> <u>Washington, DC 20416</u> Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number <u>9</u> <u>6</u> <u>2</u> <u>1</u> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien <u>\$52,000.00</u> Describe the lien <u>EIDL</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
2.11	Creditor's name <u>TBS Factoring Service</u> Creditor's mailing address <u>PO Box 18109</u> <u>Oklahoma City, OK 73154</u> Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien <u>Accounts receivable under 90 days, Accounts receivable over 90 days</u> <u>unknown</u> Describe the lien <u>Factoring Company</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Fill in this information to identify the case:

Debtor name Phase One Services LLC

United States Bankruptcy Court for the:

Southern District of TexasCase number (if known): 23-30835☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507)

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount	
2.1	Priority creditor's name and mailing address <u>City of Houston</u> <u>PO Box 1560</u> <u>Houston, TX 77251</u> Date or dates debt was incurred Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) <u>(8)</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,936.57</u>	<u>\$2,936.57</u>
2.2	Priority creditor's name and mailing address <u>Internal Revenue Service</u> <u>P.O. Box 7346</u> <u>Philadelphia, PA 19101-7346</u> Date or dates debt was incurred Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) <u>(8)</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: <u>Federal Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,200.00</u>	<u>\$1,200.00</u>

Debtor **Phase One Services LLC**

Case number (if known)

23-30835

Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing addressAztec Portacans & Containers, LTD2001 W 34th StreetHouston, TX 77018

Date or dates debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is:

Check all that apply.☒ Contingent☐ Unliquidated☐ DisputedBasis for the claim: Shipping Company

Is the claim subject to offset?

☒ No☐ Yes\$291.00**3.2** Nonpriority creditor's name and mailing addressBusiness Backer10856 Reed Hartman HwyCincinnati, OH 45242

Date or dates debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☒ DisputedBasis for the claim: Merchant Cash Advance

Is the claim subject to offset?

☒ No☐ Yes\$149,000.00**3.3** Nonpriority creditor's name and mailing addressCashable LLC2 Executive Blvd 305Suffern, NY 10901

Date or dates debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☒ DisputedBasis for the claim: Merchant Cash Advance

Is the claim subject to offset?

☒ No☐ Yes\$55,965.00**3.4** Nonpriority creditor's name and mailing addressCloud Fund, LLC400 Rella Blvd Suite 165-101Suffern, NY 10901

Date or dates debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☒ DisputedBasis for the claim: Merchant Cash Advance

Is the claim subject to offset?

☒ No☐ Yes\$71,950.00

Debtor Phase One Services LLC
NameCase number (if known) 23-30835

Part 2: Additional Page

3.5 Nonpriority creditor's name and mailing address <u>Cosco Shipping Lines</u> <u>15600 JFK Blvd 400</u> <u>Houston, TX 77032</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping Company</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6 Nonpriority creditor's name and mailing address <u>DCLI Chassis</u> <u>PO Box 603061</u> <u>Charlotte, NC 28260</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$122,744.62</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Chassis Shop Maintenance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7 Nonpriority creditor's name and mailing address <u>Department of Public Safety & Corrections</u> <u>PO Box 61047</u> <u>New Orleans, LA 70161-1047</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Tags</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8 Nonpriority creditor's name and mailing address <u>Evergreen Shipping Agency</u> <u>16000 North Dallas Parkway 400</u> <u>Dallas, TX 75248</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$4,870.00</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping Company</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Phase One Services LLC**
NameCase number (if known) **23-30835****Part 2:** Additional Page

3.9	Nonpriority creditor's name and mailing address <u>Falcon Fleet Maintenance</u> <u>PO Box 7228</u> <u>Houston, TX 77248</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Repair Shop</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address <u>HAPAG-LLOYD (AMERICA) LLC</u> <u>Regional Headquarters</u> <u>399 Hoes Lane</u> <u>Piscataway, NJ 08854</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$9,400.00</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping Company</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.11	Nonpriority creditor's name and mailing address <u>Harris County Toll Road Authority</u> <u>PO Box 4440</u> <u>Houston, TX 77210</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Toll Tags</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12	Nonpriority creditor's name and mailing address <u>HMM Co., LTD</u> <u>222 West Las Colinas Blvd 700</u> <u>Irving, TX 75039</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping Company</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Phase One Services LLC**
NameCase number (if known) **23-30835****Part 2:** Additional Page

3.13	Nonpriority creditor's name and mailing address <u>IPFS Corporation</u> <u>P.O. Box 412086</u> <u>Kansas City, MO 64141</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$48,122.95</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Business Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14	Nonpriority creditor's name and mailing address <u>M&M Tire and Mechanic Shop</u> <u>11649 Wallisville Road</u> <u>Houston, TX 77013</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Repair Shop</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.15	Nonpriority creditor's name and mailing address <u>Mediterranean Shipping Company Inc.</u> <u>4700 W Sam Houston Pkwy N 250</u> <u>Houston, TX 77041</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$15,010.00</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping Company</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.16	Nonpriority creditor's name and mailing address <u>Motive Credit Card</u> <u>3500 South Dupont Highway</u> <u>Dover, DE 19901</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$29,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Phase One Services LLC**
NameCase number (if known) **23-30835****Part 2:** Additional Page

3.17	Nonpriority creditor's name and mailing address <u>Plexe LLC</u> <u>6295 Greenwood Plaza Blvd 100</u> <u>Englewood, CO 80111</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$25,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Merchant Cash Advance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address <u>Sealand Maersk Company</u> <u>9300 Arrowpoint Blvd</u> <u>Charlotte, NC 28273</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$820.00</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping Company</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.19	Nonpriority creditor's name and mailing address <u>Shark Trucking</u> <u>12106 Mesa Drive</u> <u>Houston, TX 77016</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$17,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Repair Shop</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.20	Nonpriority creditor's name and mailing address <u>Silverline Services Inc.</u> <u>1334 Peninsula Blvd 160</u> <u>Hewlett, NY 11557</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$7,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Merchant Cash Advance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Phase One Services LLC**
NameCase number (if known) **23-30835****Part 2:** Additional Page

3.21	Nonpriority creditor's name and mailing address <u>Stream</u> <u>PO Box 650261</u> <u>Dallas, TX 75265</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.22	Nonpriority creditor's name and mailing address <u>The LCF Group</u> <u>3000 Marcus Avenue 15</u> <u>New Hyde Park, NY 11042</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$53,764.15</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Merchant Cash Advance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.23	Nonpriority creditor's name and mailing address <u>TRAC Intermodel</u> <u>750 College Road East</u> <u>Princeton, NJ 08540</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$34,270.14</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping Company</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.24	Nonpriority creditor's name and mailing address <u>Transfer Shipping</u> <u>25 W I-65 Service Road</u> <u>Mobile, AL 36602</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping Company</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Phase One Services LLC**
NameCase number (if known) **23-30835****Part 2:** Additional Page

3.25	Nonpriority creditor's name and mailing address TXTAG PO Box 650749 Dallas, TX 75265 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$6,200.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.26	Nonpriority creditor's name and mailing address Waste Management 1001 Fannin Suite 4000 Houston, TX 77002 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27	Nonpriority creditor's name and mailing address Willscot 4646 E Van Buren Street Phoenix, AZ 85008 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$40,286.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28	Nonpriority creditor's name and mailing address Ying Yang 3250 Briarpark Dr Suite 201 Houston, TX 77042 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$2,515.00</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping Company</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Phase One Services LLC
NameCase number (if known) 23-30835

Part 2: Additional Page

3.29 Nonpriority creditor's name and mailing address <u>ZiM American Integrated Shipping Lines</u> <u>5801 Lake Wright Drive</u> <u>Norfolk, VA 23502</u>	As of the petition filing date, the claim is: <u>\$5,520.00</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping Company</u>
Date or dates debt was incurred _____ Last 4 digits of account number _ _ _ _	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Phase One Services LLC**
NameCase number (if known) **23-30835****Part 3:** List Others to Be Notified About Unsecured Claims**4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2.** Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.**If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.**

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Law Offices of Isaac H. Greenfield PLLC 2 Executive Blvd 305 Suffern, NY 10901	Line <u>3.3</u> <input type="checkbox"/> Not listed. Explain _____ _____	_____ _____ _____
4.2	The Feldman Law Firm, P.C. 3000 Marcus Avenue 2W15 New Hyde Park, NY 11042	Line <u>3.22</u> <input type="checkbox"/> Not listed. Explain _____ _____	_____ _____ _____

Debtor Phase One Services LLC
NameCase number (if known) 23-30835**Part 4:** Total Amounts of the Priority and Nonpriority Unsecured Claims**5. Add the amounts of priority and nonpriority unsecured claims.****Total of claim amounts**

5a. Total claims from Part 1	5a.	<u>\$4,136.57</u>
5b. Total claims from Part 2	5b. +	<u>\$699,228.86</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	<u>\$703,365.43</u>

Fill in this information to identify the case:

Debtor name Phase One Services LLCUnited States Bankruptcy Court for the:
Southern District of TexasCase number (if known): 23-30835 Chapter 11☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

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Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	<u>Yard/Lot Lease</u> <u>Contract to be ASSUMED</u>	<u>Houston Industrial Yard, Inc./Triton Realty</u> <u>3657 Briarpark Drive 300</u> <u>Houston, TX 77042</u>
	State the term remaining	<u>50 months</u>	
	List the contract number of any government contract		
2.2	State what the contract or lease is for and the nature of the debtor's interest	<u>Modular Building Office</u> <u>Contract to be ASSUMED</u>	<u>Williams Scotsman, Inc.</u> <u>10604 1/2 Wallisville Road</u> <u>77103</u>
	State the term remaining	<u>49 months</u>	
	List the contract number of any government contract		
2.3	State what the contract or lease is for and the nature of the debtor's interest	<u>Leased Trucks</u> <u>Contract to be ASSUMED</u>	<u>OTR Leasing</u> <u>9100 Liberty Drive</u> <u>Liberty, MO 64068</u>
	State the term remaining	<u>9 months</u>	
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest	<u>Leased Trucks</u> <u>Contract to be ASSUMED</u>	<u>Financial Pacific Leasing</u> <u>3455 S. 344th Way Ste 300</u> <u>Federal Way, WA 98001</u>
	State the term remaining	<u>17 months</u>	
	List the contract number of any government contract		

Fill in this information to identify the case:

Debtor name Phase One Services LLCUnited States Bankruptcy Court for the: Southern District of Texas
(State)Case number (If known): 23-30835☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, **Schedules D-G**. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1 Williams, Ashley	12910 Breezy Meadow Ln. Street Houston, TX 77044 City State ZIP Code	Silverline Services Inc.	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		The LCF Group	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		Financial Pacific Leasing	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
		Houston Industrial Yard, Inc./Triton Realty	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
		Cashable LLC	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		Cloud Fund, LLC	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		Willscot	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		TXTAG	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		Harris County Toll Road Authority	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G

Debtor Phase One Services LLC
NameCase number (if known) 23-30835

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
		<u>Motive Credit Card</u>	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		<u>Plexe LLC</u>	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		<u>OTR Leasing</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
		<u>Williams Scotsman, Inc.</u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.2	<div> <div>Street</div> <div>City State ZIP Code</div> </div>		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	<div> <div>Street</div> <div>City State ZIP Code</div> </div>		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	<div> <div>Street</div> <div>City State ZIP Code</div> </div>		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5	<div> <div>Street</div> <div>City State ZIP Code</div> </div>		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6	<div> <div>Street</div> <div>City State ZIP Code</div> </div>		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name Phase One Services LLC

United States Bankruptcy Court for the:

Southern District of TexasCase number (if known): 23-30835 Chapter 11☐ Check if this is an amended filing**Official Form 206Sum****Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1:** Summary of Assets**1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)**1a. Real Property:**Copy line 88 from *Schedule A/B*.....\$0.00**1b. Total personal property:**Copy line 91A from *Schedule A/B*.....\$736,241.12**1c. Total of all property:**Copy line 92 from *Schedule A/B*.....\$736,241.12**Part 2:** Summary of Liabilities**2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....\$175,180.00**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....\$4,136.57**3b. Total amount of claims of non-priority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....**+** \$699,228.86**4. Total liabilities**.....

Lines 2 + 3a + 3b

\$878,545.43

Fill in this information to identify the case:

Debtor name Phase One Services LLC

United States Bankruptcy Court for the:

Southern District of TexasCase number (if known): 23-30835☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/22**

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue

Check all that apply

Gross revenue

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2023 to Filing date
MM/ DD/ YYYY☒ Operating a business\$314,671.00☐ Other _____

For prior year:

From 01/01/2022 to 12/31/2022
MM/ DD/ YYYY MM/ DD/ YYYY☒ Operating a business\$2,548,669.99☐ Other _____

For the year before that:

From 01/01/2021 to 12/31/2021
MM/ DD/ YYYY MM/ DD/ YYYY☒ Operating a business\$1,149,793.80☐ Other _____**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None**Description of sources of revenue****Gross revenue from each source**

(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2023 to Filing date
MM/ DD/ YYYY

For prior year:

From 01/01/2022 to 12/31/2022
MM/ DD/ YYYY MM/ DD/ YYYY

For the year before that:

From 01/01/2021 to 12/31/2021
MM/ DD/ YYYY MM/ DD/ YYYY

Debtor Phase One Services LLC
Name

Case number (if known)

23-30835

Part 2: List Certain Transfers Made Before Filing for Bankruptcy**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <u>The LCF Group</u> Creditor's name <u>3000 Marcus Avenue 15</u> Street <u>New Hyde Park, NY 11042</u> City State ZIP Code	<u>02/08/2023</u> 	<u>\$19,850.00</u> 	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. <u>Cloud Fund, LLC</u> Creditor's name <u>400 Rella Blvd Suite 165-101</u> Street <u>Suffern, NY 10901</u> City State ZIP Code	<u>12/01/2022</u> <u>01/01/2023</u> <u>02/01/2023</u> 	<u>\$16,620.00</u> 	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.3. <u>Cashable LLC</u> Creditor's name <u>2 Executive Blvd 305</u> Street <u>Suffern, NY 10901</u> City State ZIP Code	<u>12/01/2022</u> <u>01/01/2023</u> <u>02/01/2023</u> 	<u>\$16,500.00</u> 	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.4. <u>Silverline Services Inc.</u> Creditor's name <u>1334 Peninsula Blvd 160</u> Street <u>Hewlett, NY 11557</u> City State ZIP Code	<u>01/01/2023</u> <u>02/01/2023</u> 	<u>\$12,240.00</u> 	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
----------------------------	-------	-----------------------	---------------------------------

Debtor Phase One Services LLC Case number (if known) 23-30835

Name

4.1. Ashley Williams 02/01/2023 \$11,500.00 Owner Draws
 Creditor's name
12910 Breezy Meadow Ln. 01/01/2023
 Street

Houston, TX 77044
 City State ZIP Code
 Relationship to debtor
Owner

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Description of the property	Date	Value of property
-----------------------------	-----------------------------	------	-------------------

5.1. _____
 Creditor's name

 Street

 City State ZIP Code

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

6.1. _____
 Creditor's name
 XXXX- _ _ _ _
 Street

 City State ZIP Code

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None

Case title	Nature of case	Court or agency's name and address	Status of case
<u>Cashable LLC vs Phase One Services</u>	<u>Merchant Cash Advance</u>	<u>Kings County Supreme Court</u> Name <u>360 Adams St #4</u> Street <u>Brooklyn, NY 11201</u> City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
<u>Case number</u> <u>2022-007259-2</u>			

Debtor Phase One Services LLC

Case number (if known)

23-30835

Name

7.2.	Case title	Nature of case	Court or agency's name and address	Status of case
	The LCF vs Phase One	Merchant Cash Advance	Nassau County Supreme Court Name 100 Supreme Ct. Dr. Street	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
	Case number			
	603729/2023		Mineola, NY 11501 City State ZIP Code	
7.3.	Case title	Nature of case	Court or agency's name and address	Status of case
	Financial Pacific vs Phase One Services	Delinquent Truck Leases	Tarrant County 348th District Court Name 100 North Calhoun Street 3rd Floor Street Tom Vandergriff Civil Courts Building Fort Worth, TX 76196 City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
	Case number			
	2022-007259-2			

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

8.1.	Custodian's name and address	Description of the property	Value
	Custodian's name		
	Street	Case title	Court name and address
			Name
	City State ZIP Code	Case number	Street
		Date of order or assignment	City State ZIP Code

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**
☒ None

9.1.	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
	Recipient's name			
	Street			
	City State ZIP Code			
	Recipient's relationship to debtor			

Debtor Phase One Services LLC

Case number (if known)

23-30835

Name

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☐ None**Description of the property lost and how the loss occurred****Amount of payments received for the loss**

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (*Schedule A/B: Assets – Real and Personal Property*).**Date of loss****Value of property lost**

10.1. Former Employees took Business Papers. None 03/16/2022 \$600,000.00
Flashdrives and services related to the business operations. Period of loss took place at various times from March 2022 through December 2022.

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

11.1. Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
<u>The Lane Law Firm</u>	<u>Attorney's Fee</u>	<u>02/23/2023</u>	<u>\$5,000.00</u>
Address	<u>Attorney's Fee</u>	<u>03/06/2023</u>	<u>\$15,000.00</u>
<u>6200 Savoy Suite 1150</u>			
Street			
<u>Houston, TX 77036</u>			
City	State	ZIP Code	
Email or website address			
<u></u>			
Who made the payment, if not debtor?			
<u></u>			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

12.1. Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
<u></u>	<u></u>	<u></u>	<u></u>
Trustee	<u></u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></u>	<u></u>

Debtor Phase One Services LLC
NameCase number (if known) 23-30835**13. Transfers not already listed on this statement**

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

13.1.	Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
	<div>Address</div> <div>Street</div> <div>City State ZIP Code</div> <div>Relationship to debtor</div>			

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

14.1.	Address	Dates of occupancy
	<div>7544 FM 1960 Rd E 1002</div> <div>Street</div> <div>Humble, TX 77346</div> <div>City State ZIP Code</div>	<div>From 7/1/2020 To 4/1/2022</div>

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:
 —diagnosing or treating injury, deformity, or disease, or
 —providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.☐ Yes. Fill in the information below.

Debtor Phase One Services LLC

Case number (if known)

23-30835

Name

Facility name and address**Nature of the business operation, including type of services the debtor provides****If debtor provides meals and housing, number of patients in debtor's care**

15.1.

Facility name

Street

City

State

ZIP Code

Location where patient records are maintained(if different from facility address). If electronic, identify any service provider.**How are records kept?**

Check all that apply:

☐ Electronically☐ Paper**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**☒ No.☐ Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

☐ No☐ Yes**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?**☒ No. Go to Part 10.☐ Yes. Does the debtor serve as plan administrator?☐ No. Go to Part 10.☐ Yes. Fill in below:**Name of plan****Employer identification number of the plan**

EIN: _ _ - _ _ _ _ _

Has the plan been terminated?

☐ No☐ Yes**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None**Financial institution name and address****Last 4 digits of account number****Type of account****Date account was closed, sold, moved, or transferred****Last balance before closing or transfer**

18.1

Name

Street

City

State

ZIP Code

XXXX- _ _ _ _

☐ Checking☐ Savings☐ Money market☐ Brokerage☐ Other

Debtor Phase One Services LLC

Case number (if known)

23-30835

Name

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

19.1	Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	Name			<input type="checkbox"/> No
	Street			<input type="checkbox"/> Yes
	City	Address		
	State			
	ZIP Code			

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

20.1	Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	Name			<input type="checkbox"/> No
	Street			<input type="checkbox"/> Yes
	City	Address		
	State			
	ZIP Code			

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
Name			
Street			
City			
State			
ZIP Code			

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Debtor Phase One Services LLC

Case number (if known)

23-30835

Name

- ☐ **Hazardous material** means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No

☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
	Name		<input type="checkbox"/> Pending
Case number	Street		<input type="checkbox"/> On appeal
			<input type="checkbox"/> Concluded
	City State ZIP Code		

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

☒ No

☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

24. Has the debtor notified any governmental unit of any release of hazardous material?

☒ No

☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

Debtor Phase One Services LLC

Case number (if known)

23-30835

Name

Business name and address**Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

25.1.

EIN: _ _ - _ _ - _ _

Name

Dates business existed

Street

From _ _ _ _ _ To _ _ _ _ _

City State ZIP Code

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☒ None**Name and address****Dates of service**

26a.1.

From _ _ _ _ _ To _ _ _ _ _

Name

Street

City State ZIP Code

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None**Name and address****Dates of service**

26b.1.

From _ _ _ _ _ To _ _ _ _ _

Name

Street

City State ZIP Code

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None**Name and address****If any books of account and records are unavailable, explain why**

26c.1.

Name

Street

City State ZIP Code

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Debtor Phase One Services LLC Case number (if known) 23-30835

Name

Name and address

26d.1.

Name

Street

City

State

ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of
inventory****The dollar amount and basis (cost, market, or
other basis) of each inventory****Name and address of the person who has possession of inventory records**

27.1.

Name

Street

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.**Name****Address****Position and nature of any
interest****% of interest, if any**Ashley Williams12910 Breezy Meadow Ln. Houston, TX 77044President, Owner100.00%**29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?**☒ No☐ Yes. Identify below.**Name****Address****Position and nature of any
interest****Period during which
position or interest was
held**

From _____

To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No☒ Yes. Identify below.

Debtor Phase One Services LLC

Case number (if known)

23-30835

Name

Name and address of recipient

Amount of money or description
and value of property

Dates

Reason for providing
the value

30.1. Ashley Williams \$1,500.00 02/01/2023 Owner Draws

Name

12910 Breezy Meadow Ln.

Street

Houston, TX 77044

City

State

ZIP Code

Relationship to debtor

Owner

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: _ _ - _ _ _ _ _

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

EIN: _ _ - _ _ _ _ _

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03/10/2023
MM/ DD/ YYYY**X** /s/ Ashley Williams Printed name Ashley Williams
Signature of individual signing on behalf of the debtor

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?☒ No☐ Yes